



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN	DATE OF INSPECTION
950123 La Monte Police	06/03/2009
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
304 West Front Street La Monte	1156 hrs

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 49 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34 °C

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .096

TEST 2 .096

TEST 3 .096

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS 0 (0-.04) 0 (.05-.09) 0 (.10-.14) 0 (.15-.19) 0 (Over .19)

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

SUPPLIER: Guth Labs CONCENTRATION: 0.10 EXPIRES: 8/11/2009 LOT#: 08280

INSPECTING OFFICER

SIGNATURE

PRINT NAME

James E. Ulm

TYPE II PERMIT NUMBER/EXPIRATION DATE

TELEPHONE NUMBER

720199 / 09/27/2009

660-347-5106



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08280** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1212** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **August 11, 2009** at **11:59 PM**.

When used in a calibrated Simulator, operating at **34°C +/- .2°C**, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
LEMONTE POLICE DEPARTMENT

END INSTRMASTER SERIAL NUMBER 950123
06/23/89

TESTING OFFICER:

ULM/JAMES/E
OFFICER I.D.: 791
PERMIT NUMBER: 728199
EXPIRATION DATE: 08/25/09
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BULK TEST	.000	11:56
INTERNAL STANDARD	VERIFIED	11:57
EXTERNAL STANDARD	.096	11:57
BULK TEST	.000	11:58
INTERNAL STANDARD	.096	11:59
EXTERNAL STANDARD	.000	11:59
BULK TEST	.096	12:00
INTERNAL STANDARD	.000	12:00
EXTERNAL STANDARD	.000	12:00

12 10 12
 2 1 1
 10 13 11
 11 11 10
 10 11
 10 11
 10 11
 10 11

Operator Signature _____
Printed or recycled paper

CMSU 2208-02

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
LEMONTE POLICE DEPARTMENT

END DATAMASTER SERIAL NUMBER 950123
05/03/89

DEPART TIME: 18:05

POSTTEST

DOB: 11/11/72 SEX: M
STATE/D.L.: MO/123-456789
APPOINTING OFFICER:

三ノ宮

“三、四、五”

1520

References

0441059 1.D.: 721
 SERIAL NUMBER: 726199
 EXPIRATION DATE: 09/25/09
 PHYSICIAN'S NAME:

SECRET

BLANK TEST	.5002	12:03
20110 INTERFERENCE		

Operator Signature _____
Printed on recycled paper

CMSU 2208-02

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
LEMONTE POLICE DEPARTMENT

ENC DATAMASTER SERIAL NUMBER 950123

65-15379-93
11:54

— DIHNSUSTIC CHECK —

COMPUTER: DKG

PROGRAM: DK99

HEATERS
SINGLE CHARGER: 490

FLIGHT DETECTOR: OKAY

OKAY

REFLECTOR: DKKP7

UNITED STATES OF AMERICA
DISTRICT COURT OF SOUTHERN DISTRICT OF NEW YORK

01957Z STANBET: OKAY

OKAY

```

PRINT TEST
1#58787000--/0123456789:;<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ^_`abcdefghijklmnopqrstuvwxyz
abcdefghijklmnopqrstuvwxyz
abcdefghijklmnopqrstuvwxyz

```

Operator Signature

CMSU 2208-02